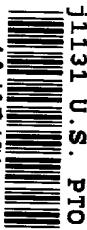


NONPROVISIONAL PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



OLIFF & BERRIDGE, PLC
P.O. Box 19928
Alexandria, Virginia 22320
Telephone: (703) 836-6400
Facsimile: (703) 836-2787

Customer Number: 25944

Attorney Docket No.: 111580

Date: December 27, 2001



BOX PATENT APPLICATION

**NONPROVISIONAL APPLICATION TRANSMITTAL
RULE §1.53(b)**

Director of the U.S. Patent and Trademark Office
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application

For (Title): THIN FILM MAGNETIC HEAD, MAGNETIC HEAD DEVICE AND MAGNETIC DISK
DRIVING DEVICE

By (Inventors): Makoto YOSHIDA, Taro OIKE, Noboru YAMANAKA

Formal drawings (Figs. 1-14; 13 sheets) are attached.
 Use Figure _____ for front page of Publication.

A Declaration and Power of Attorney is filed herewith.

This patent application is assigned to TDK CORPORATION.
 The executed Assignment is filed herewith.

An Information Disclosure Statement is filed herewith.

Entitlement to small entity status is hereby asserted.

A Preliminary Amendment is filed herewith.

Please amend the specification by inserting before the first line the sentence --This nonprovisional application claims the benefit of U.S. Provisional Application No. _____, filed _____.--

Priority of foreign application No. 2001-8315 filed January 16, 2001 in Japan is claimed (35 U.S.C. §119).
 A certified copy of the above corresponding foreign application(s) is filed herewith.

This application is NOT to be published under 35 U.S.C. 112(b). The undersigned attorney or agent hereby certifies that the invention disclosed in this application has not been and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing.

The filing fee is calculated below:

**CLAIMS IN THE APPLICATION AFTER ENTRY OF
ANY PRELIMINARY AMENDMENT NOTED ABOVE**

FOR:	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	16 - 20	= *0
INDEP CLAIMS	1 - 3	= *0
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED		

* If the difference is less than zero, enter "0".

Check No. 126412 in the amount of \$740 to cover the filing fee is attached. Except as otherwise noted herein, the Director is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

James A. Oliff
Registration No. 27,075

Joel S. Armstrong
Registration No. 36,430

SMALL ENTITY		OTHER THAN A SMALL ENTITY	
OR	RATE	OR	RATE
OR	\$ 370	OR	\$ 740
OR	x 9 = \$	x 18 = \$	
OR	x 42 = \$	x 84 = \$	
OR	+ 140 = \$	+ 280 = \$	
TOTAL		OR	TOTAL \$ 740